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RECOMMENDATION FOR ADDITIONAL GENERAL RESOURCES TO FUND THE APPROVED COUNTRY PROGRAMMES*

SUMMARY

This document contains recommendations for additional general resources to fund the approved country programmes in countries in the Africa, Americas and the Caribbean, and Asia regions for which the balances of approved general resources are not sufficient to fund the programmes up to the approved programme period 1991 to 1992. The Executive Director recommends that the Executive Board approve additional general resources in the following amounts, totalling $6,151,000, to achieve the objectives of the country programmes as originally approved by the Board.

Country/programme	Amount (United States dollars)	Current programme cycle
Colombia	1 168 000	1988-1992
Côte d'Ivoire	1 203 000	1990-1991
Eastern Caribbean countries	1 189 000	1988-1992
El Salvador	1 251 000	1988-1992
Papua New Guinea	1 340 000	1988-1992

Annual funding requirements of the five countries are provided in the table.

* In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1990, will be contained in the "Summary of 1991 recommendations for general resources and supplementary funding programmes" (E/ICEF/1991/P/L.2).

INTRODUCTION

1. The increased availability of general resources in 1990 and the continuing positive income projections in the medium-term plan have permitted the Executive Director to authorize increases in the annual planning levels of a number of countries. This increase raises the annual planning levels for general resources from $500,000 to $750,000 for countries with a child population of more than 1 million and/or full-fledged UNICEF country offices, and raises the minimum general resources planning level for other countries to $500,000. The minimum planning level for the multi-island programmes has also been raised.

2. In addition, the Executive Director has authorized accelerated expenditure in the Côte d'Ivoire to reinforce programme execution in several key areas. In Colombia and El Salvador, the Executive Director has authorized accelerated expenditure within the approved period of the country programme to support accelerated action towards the achievement of universal child immunization (UCI) in 1990.

3. As a result, the balances of approved general resources are not sufficient to fund the five programmes up to the end of the approved country programme period. The Executive Director recommends, therefore, that the Executive Board approve additional amounts from general resources to cover the programme period originally approved by the Board.

I. COLOMBIA

4. The country programme for Colombia was approved by the Executive Board in 1988 for the period 1988-1992 with available general resources of $4,662,000 (E/ICEF/1988/P/L.12). In 1990, the annual planning level was increased from $1 million to $1.1 million, enabling the Government to expand country programme activities. Additionally, in 1990, the annual planning level for Colombia was increased by $400,000 to support accelerated immunization activities.

5. The social policies of the current administration include five programmes that directly address the needs of children and women in the areas of basic education, primary health care (PHC), home day-care centres, human settlements and the provision of basic commodities and food security. UNICEF has supported several of these programmes within the framework of the 1988-1992 country programme. This programme will continue in 1991 and 1992, focusing on the elements set out below.

Child survival

6. The national child survival programme, Supervivir, has achieved significant progress in terms of intersectoral participation and social mobilization. The programme is being implemented in all provinces of the

country and has established a network of 400,000 health monitors, 80 per cent of whom are high school students. It has also had an important impact on immunization.

7. In the 1980s, Colombia made major strides in extending vaccination coverage and in controlling vaccine-preventable diseases using multiple strategies and a vigorous social mobilization approach. Vaccination coverage in 1980 increased from an average of 20 per cent for the main antigens - combined diphtheria/pertussis/tetanus, anti-tuberculosis, polio and measles vaccines - to an average national level of 80 per cent by 1990. During 1990, improvements in the information system led to the identification of municipalities where coverage was critical and "mop-up operations" were encouraged. Epidemiological studies provided the basis for local health agencies to identify and reduce lost vaccination opportunities. The immunization programme has succeeded in fostering a culture of immunization among the population. Parental resistance to vaccination has been overcome through sustained education and mobilization efforts. Colombia shows a strong potential to increase and sustain coverage beyond 80 per cent, although significant regional variations still persist.

8. UNICEF will maintain its support to the child survival programme and will reinforce its strategies for involving new institutional partners, mobilizing community organizations and decentralizing administrative procedures. This will include support for the Ministry of Health's immunization strategy, which supplements the regular programme with immunization days and special "mop-up" operations.

Child development

9. The Government of Colombia has made important advances in child development through child-care programmes for children under seven years of age. Although these programmes already reach 1 million children, particularly those between three and six years of age, a similar number of children - approximately 800,000 youngsters under two years and nearly 300,000 children under six years - remain unserved. In addition, the quality of services to promote child development needs to be strengthened.

10. The Government has acknowledged the need to formulate a national child development policy and has requested UNICEF support. Such a policy would be based on the assumption that not all children require the same type of care and that universalization is possible if beneficiaries are selected on the basis of age, family situation, income level and type of needs. UNICEF cooperation will focus on creating a child-care network for all children under seven years of age, using itinerant promoters and the mass media to educate parents and transfer knowledge and technology for child care at home at a lower cost.

Basic education

11. UNICEF will continue to support the programme for universalization of basic education in rural areas through the application of the "new school" methodology, which has been adopted officially as the curriculum for rural primary education. UNICEF has assisted in the preparation of revised study guides and other curriculum materials, including aspects related to children's rights, child survival and development (CSD), environmental conservation and the elimination of sexual stereotypes. Support will also be provided to "new school" methodology for urban areas.

Basic services for Bogota

12. The programme aims to support the authorities of the District of Bogota in their efforts to improve the quality of life of children who live in conditions of critical poverty.

13. In the past, it has been constrained by the limited coordinating capacity of the implementing agency and a lack of support from the previous municipal administration. At present, the programme is being reformulated in an effort to involve other parties in its planning and execution, such as the new mayor, non-governmental organizations (NGOs) and other district development agencies.

Basic services for the Pacific Coast

14. This programme seeks to improve the standard of living of the Pacific Coast population through access to basic social services by promoting physical, economic and social integration with the rest of the country and strengthening community participation in identifying and meeting basic needs.

15. The Pacific Coast programme has improved health, education and child-care services, although there have been some problems with service delivery. Many of the past year's activities focused on implementing an integrated strategy.

16. Future activities will include continued support for social mobilization to familiarize mayors with the programme; the provision of water and environmental sanitation; and the evaluation of income-generating projects to determine their impact on the community and further their integration into the region's overall development strategy.

Social policies

17. UNICEF has supported social policy development through research and the diffusion of information and by strengthening management capacity and identifying appropriate technologies to improve institutional social services offered by the State, especially those related to children, women and the family. UNICEF will continue to support research on local planning and community participation, for the design of a system of social indicators with reference to women and children, and to evaluate previous projects.

Advocacy and communication

18. UNICEF is providing support to the Ministry of Communications to define communication policy for social development programmes; to design sustained communications strategies to guide, coordinate and mobilize different sectors in favour of children and women; and to develop innovative communication methodologies to sensitize policy makers at the national level and in the private sector in order to solve the problems facing children and women.

19. Continued support will be provided in the areas of programme support, social communications planning, social mobilization, institutional strengthening, evaluation and coordination.

II. COTE D'IVOIRE

20. The country programme for Côte d'Ivoire for the period 1990-1991 was approved by the Executive Board in 1989 with a general resources ceiling of $1,940,000 (E/ICEF/1989/P/L.5). An additional $1,203,000 is being requested not only to replenish the approved amounts of general resources that have been depleted by increases in funding ceilings since 1989, but also to reinforce programme execution in several key sectors, including some activities responding to emerging needs. In the current period, the country has not benefited from supplementary assistance and all activities have been financed from general resources. A country office independent of the West and Central Africa Regional Office was established in 1990.

21. Since the elaboration of the present country programme, which was based on the 1988 situation analysis, the economic situation in the Côte d'Ivoire has continued to deteriorate rapidly, with negative consequences for national capacity and budgets and the overall quality of life of the population, especially children and women. Since 1985, the economic crisis, which the country has been facing for the past decade, has worsened. Its consequences on state and individual income have been so devastating that the Cote d'Ivoire can no longer be considered a middle-income country.

22. The prices of primary export products such as coffee and cocoa, responsible for 40 per cent of foreign exchange earnings, continued to decline sharply. Whereas in 1988 poverty indices showed 10 per cent of the population with an income below the poverty line, more recent estimates show that 40 per cent of the population now earn less than that level. State capacity to meet its own social obligations has also been largely curtailed. In the area of health, for example, a 3 per cent annual reduction in expenditure has resulted in reduced access to PHC. In 1990, funds normally allocated by the Ministry of Health to purchase vaccines and essential drugs were drastically reduced, and essential drugs became scarce in many health facilities and in almost all peripheral health units.

Primary health care

23. Continued high maternal mortality rates (MMRs) are attributable to a number of causes, including economic and socio-cultural factors, inadequate surveillance of women during pregnancy and the poor nutritional status of women. A direct correlation has also been established between increasing maternal mortality in hospitals in Abidjan, the capital, and the lack of essential drugs and inadequate health services at the peripheral level. Infant and child mortality rates remain relatively high at 95 and 142 per 1,000 live births, respectively. Major causes of infant and child deaths are diarrhoeal diseases, meningitis, malnutrition, acute respiratory infections (ARI), malaria and premature births. Recent morbidity reports trace the decline of health in the Côte d'Ivoire. Diseases such as yaws and dracunculiasis (Guinea worm disease) have reappeared, and recent surveys estimate that approximately 3.1 million people are at risk of the latter. Only 30 per cent of families have latrines in rural and peri-urban areas. In most schools, latrines are non-existent. A 1989 survey estimated that human immunodeficiency virus (HIV) seropositivity rose from 4 per cent in 1986 to 9 per cent in 1989. Among prostitutes, this prevalence rose to 51 per cent in 1988 and 70 per cent in 1990. In June 1990, there were 3,647 officially declared cases of acquired immunodeficiency syndrome (AIDS). It is noteworthy that HIV in the Côte d'Ivoire is present in urban and rural areas in almost similar proportions.

24. PHC interventions will be geared towards national coverage. Other interventions for street children, environmental sanitation, women and young child development will be area-based and limited in this phase to the most affected geographical zones. At the zonal or area-based level, the programme will focus on encouraging effective community participation. Increased and improved national capacities, both professional and institutional, will also be emphasized.

25. The present programme focuses on continued support to the expanded programme on immunization (EPI) in order to attain 80 per cent immunization coverage and, thereafter, sustain that level. In order to do so and to provide improved maternal and child health (MCH) care, it will be necessary to enhance national and local capacities to support a well-managed PHC system. Within the context of EPI in 1990, an increase of 249 fixed immunization centres was planned so as to decentralize programme management and achieve an immunization access rate of nearly 50 per cent. This strategy of correctly equipping fixed health centres to provide immunization is a precursor to the development, starting in 1991, of an efficient health system that should provide a package of basic health services, in accordance with local health profiles, in each rural health zone. Major support will be provided in 1991

for information, education and communication activities. Television and radio programmes, as well as the creation and training of local social mobilization committees, have been emphasized in the context of EPI, and these will be broadened to address PHC.

26. The 26 rural health zones throughout the country have been reinforced primarily for EPI. In 1991, the administration of oral rehydration therapy (ORT), improved MCH services and the control and reduction of yaws, dracunculiasis and malnutrition are to be emphasized in each rural health zone, in addition to EPI. The social mobilization committees formed in each of the rural health zones will also sensitize communities about AIDS prevention measures, especially for women.

27. It is planned to support village pharmacies and dispensaries in rural health zones, where the concept of community financing has already been established, with a view to providing affordable essential drugs and to facilitating the eventual development of self-sustained, community managed and financed systems in the spirit of the Bamako Initiative.

Environmental sanitation

28. The emphasis on reinforcing PHC, particularly the wider dissemination of ORT, is a partial response to the high incidence of child morbidity and mortality caused by diarrhoeal diseases. Poor sanitation services and practices have been addressed by the school sanitation programme, which was initiated in schools in peri-urban areas where overcrowding and poor sanitation facilities create an environment that is both unsanitary and unfavourable to learning.

29. A project for latrine construction, targeting 40 primary schools, has been developed with the participation of teachers, municipalities and the population, and with technical assistance from the World Bank. Construction will be accompanied by sensitization and information activities, with parents and students responsible for maintenance. In the rural health zone of Biankouma, 20 villages have been targeted for construction of some 250 family latrines, with assistance from a local NGO and the participation of families benefiting from the project. Although latrine construction has been emphasized, it is hoped that the wider concept of waste disposal and environmental protection will also be stressed.

Children in difficult circumstances

30. In the field of education, despite continued high state expenditure, recent statistics show that 75 per cent of students enrolled in primary school and 70 per cent of students enrolled in the first year of secondary school do not complete their studies. This situation has resulted in increasing numbers of street children. In the urban commune of Abobo in Abidjan, with a population of about 400,000, there are approximately 3,000 street children. A study undertaken during 1990 will provide comprehensive quantitative and qualitative data on this group of children.

31. The economic crisis has affected both government capacity to provide basic education to all school-aged children and parents' capacity to support the cost of their children's education. The number of children outside the school system and not yet integrated into productive life is estimated at 56,500. The approved programme of cooperation for the 1990-1991 period had placed only limited emphasis on this problem. Since government authorities are concerned about this group who lack adequate skills to be integrated into the productive labour force, and since national policies support the principle of basic education for all, a directorate has been created to develop appropriate responses to the needs of children outside of the school system who are now in the street. Among the major tasks assigned to this directorate are the consolidation of an appropriate database and the development of appropriate interventions on behalf of these children. UNICEF will assist in both activities.

Women

32. The absence of viable statistical data on women remains a problem of programme development in the Côte d'Ivoire. However, a major study has been initiated to constitute a data bank on the situation of women. Available information indicates that women's economic situations remain unfavourable. Women, who constitute a majority of subsistence farmers and workers in the informal sector, are most prominent among the poorest population groups. High illiteracy rates (77 per cent) and inadequate education and preparation for a productive life adversely affect women's capacity to participate at all levels of the development process.

33. Improved social and living conditions for women, as well as their proper integration into the development process, have been the focus of actions undertaken by the Ministry of Women's Affairs, which plans to reinforce its capacity to support programmes for women by training rural animators in health, literacy, management and organization of cooperatives, improved production techniques and sensitization of women's groups. The Ministry also plans to develop a database on the situation of women in the Côte d'Ivoire. Activities for the protection and development of young children have been planned to reduce the infant mortality rate through appropriate and timely interventions in health service facilities and the organization of appropriate community-based interventions, including child-care centres.

34. Programme implementation will be administered by the relevant technical ministries at central and peripheral levels, as applicable. The Ministry of Planning will assume responsibility for general coordination through its Directorate of Programmes. PHC activities will be managed at the level of rural health zones and coordinated through the National Directorate of Public Health. MCH activities will benefit from collaboration with the Ministry of Youth, Sport and Social Affairs, which will also be responsible for the projects concerning the young child and children in difficult circumstances. The Ministry of Women's Affairs will manage projects under its jurisdiction. The Ministry of Education, together with a technical team from the World Bank and from municipalities, will execute the school hygiene component of the sanitation programme.

35. The Government will be assisted in the development of a national programme of action to achieve the goals endorsed by the World Summit for Children. The national adaptation of the Summit's goals will incorporate many national and local organizations, including NGOs.

III. EASTERN CARIBBEAN COUNTRIES

36. The multi-island programme serving nine Eastern Caribbean countries (Antigua and Barbuda, the British Virgin Islands, Dominica, Grenada, Montserrat, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines and Turks and Caicos Islands) was approved by the Executive Board for the period 1988-1992 with available general resources of $2,250,000 (E/ICEF/1988/P/L.14). Because of increased general resources availability, the annual planning level has been increased by $450,000 to $900,000 from 1991 onwards.

37. The additional funds are being requested to intensify advocacy, information and communications activities; initiate new efforts to improve the social and economic status of women in the subregion; and improve monitoring and evaluation of the UNICEF-assisted multi-island programme.

Child survival and development

38. The two-tiered approach of the multi-island programme is proving to be effective. It entails supporting country-specific projects in the individual islands, in addition to a range of activities designed to have an impact on common problems and to promote innovative child development actions in the subregion.

39. Subregional activities are largely in the areas of advocacy, information and communications on such common problems as child abuse and adolescent pregnancy. Themes such as early childhood education, AIDS prevention and the adoption and implementation of the Convention on the Rights of the Child are also promoted.

40. Country-level activities include support to PHC, especially EPI, which succeeded in achieving UCI in all nine countries by the end of 1989. Attention will now focus on the achievement of 100 per cent immunization coverage throughout the East Caribbean, as well as the eradication of measles by 1995. To help attain this objective, UNICEF is supporting improvement of the cold chain and the implementation of social mobilization strategies. In Grenada, for example, technical assistance was provided for the design of communications materials, in addition to funds for production and distribution. This assistance helped to increase immunization coverage substantially in 1989 and subsequently sustain it at over 80 per cent in 1990.

41. In addition to health, assistance is also provided at the country level for projects in early childhood development, nutrition, women in development and water and sanitation. In early childhood development, the quality and

coverage of services are increasing in all territories. Antigua and Barbuda, for example, has expanded pre-school enrolments to 50 per cent of pre-school-age children, while 71 pre-school teachers out of a total of 80 received in-service training in the period 1988-1990.

Advocacy and information

42. Advocacy and information are the cornerstone of the UNICEF programme strategy in the Eastern Caribbean. Building alliances with partners in the diverse programming environment of the nine countries is an ongoing challenge, which is being met with considerable success.

43. Awareness of important themes such as the Convention on the Rights of the Child and better parenting practices is increasing at all levels of society, from political leadership to community groups. Public consciousness and action is on the upsurge regarding problems such as child abuse and AIDS. This increased consciousness is the result of a comprehensive advocacy and information approach that uses all available media to stimulate concern and positive action on behalf of children in the Eastern Caribbean.

44. One example of the approach is an innovative agreement signed by the Caribbean News Agency, the Caribbean Broadcasting Union and UNICEF to produce and disseminate throughout the region a series of thirty 60-second public service announcements, six 15-minute radio features, three one-hour call-in radio discussion programmes, a monthly wire service feature and a bi-weekly five-minute television feature. Under the title Caribbean Multi-Media Support, the agreement ensures regular media coverage of children's issues throughout the Caribbean and even beyond. Other information activities with a wide outreach include the production of a quarterly newsletter and an occasional comic magazine, designed and illustrated by local artists to draw attention to social problems affecting teenagers, such as AIDS and drug abuse.

45. Some of the additional funds will be used to intensify and expand the advocacy and information strategy, which is proving to be so effective in public education, and to support mobilization and positive action on behalf of Caribbean children. Expanding linkages with churches and other religious groups will be emphasized, as well as with NGOs and community organizations that are working in the most deprived areas of the subregion. Other institutions such as the University of the West Indies Distance Teaching Experiment will also be assisted as part of the overall strategy, which aims to keep building on the alliance that is steadily growing in profile, outreach and effectiveness.

Women in development

46. Adolescent pregnancy is one of the main social problems in the Eastern Caribbean, and UNICEF support has been aimed at helping teenage mothers and their children. Teenage motherhood, which produces the syndrome of "children rearing children", occurs most frequently among poor and deprived women and is often accompanied by obstetrical complications, child abuse and endemic poverty.

47. UNICEF has been involved in efforts to continue the basic education of adolescent mothers since they are quite often prohibited from or unwilling to re-enter the school system. UNICEF has also supported programmes aimed at the acquisition of employment and income-generation skills, as well as those for child care and better parenting.

48. It is estimated that 50 per cent of households in the Caribbean are headed by single females. The economic policies and events of the past decade have had a negative effect on the quality of the lives of these women and their children.

49. A regional strategy for women in development which aims, inter alia, to improve the economic situation of poor women, was endorsed by women leaders and key government officials from the nine countries in October 1990 at the UNICEF mid-term programme review meeting.

50. UNICEF will, therefore, initiate support in this area, utilizing funds primarily for supporting income-generating initiatives for women through national development foundations. Emphasis will be placed on feasibility analyses, training and credit schemes, as well as institutional support, to ensure sustainability at both country and subregional levels.

Monitoring and evaluation

51. In dealing with the ministries, institutions and NGOs of nine countries, as well as regional bodies, the task of managing and planning UNICEF assistance and the monitoring and evaluating of the performance of UNICEF-assisted projects is complex, especially since there are no UNICEF staff posted in any of these countries.

52. Additional resources will be used to provide technical assistance for programme management and for monitoring and evaluating the performance of the multi-island programme in terms of programme inputs and outputs and the overall effectiveness and impact at both individual country and subregional levels. Monitoring progress of the achievement of the goals for children in the 1990s will constitute an important part of this activity.

IV. EL SALVADOR

53. The country programme for El Salvador for 1988-1992 was approved in 1988 with available general resources of $1,638,000 (E/ICEF/1988/P/L.15). Owing to increased general resources availability, the annual planning level for 1991 and 1992 will be increased to $750,000. In addition, accelerated expenditure was authorized for 1990, which enabled the Government to achieve UCI before the end of 1990.

54. There are new developments and challenges in El Salvador as a result of adjustments in social policy, expressed in compensatory social programmes to alleviate the impact of economic adjustment measures. The commitment of the

Government to the most vulnerable groups has been expressed in a number of ways, including decentralization policies to strengthen local government, a renewed emphasis on community participation, the creation of a Social Investment Fund and National Family Secretariat and the promulgation of a General Law of Education for the extension of pre-school services and basic primary education, with corresponding budgetary allocations.

55. In line with government social programmes, the additional funds will be utilized to accelerate programme implementation in the areas of health, nutrition, education and water supply and sanitation, with a continuing focus on poverty and conflict areas; for new cooperation to benefit children in especially difficult circumstances; and to strengthen technical support, in particular towards the Social Investment Fund.

Health and nutrition

56. Within the subregional child survival programme and the basic services approach of the country programme, the primary focus of UNICEF cooperation in El Salvador has been in the area of child survival, emphasizing a PHC strategy. With immunization and the successful "Days of Tranquillity" as the cornerstone of the approach, significant progress has also been made in other areas. For example, in the control of diarrhoeal diseases (CDD), a system for the promotion and distribution of oral rehydration salts (ORS) has been established in partnership with a multinational corporation with over 40,000 sales outlets. UNICEF has also supported the training and equipping of 2,000 new traditional birth attendants (TBAs) in areas of extreme poverty, in addition to planning for the establishment of birthing/delivery centres.

57. This cooperation will be continued and expanded, with a focus on monitoring child growth and development, the promotion of breast-feeding, the control of ARI and women's health issues.

58. UNICEF support will be provided through the Catholic Church to five dioceses, using pastoral agents for training technical staff and promotors, in addition to printing of educational materials and community health education activities. Some 16 regional coordinators and 654 pastoral agents will be trained each year. These activities will be targeted to the 78 poorest municipalities of the country.

59. UNICEF will also provide support for the establishment of a food and nutrition surveillance system, for fortification of sugar with vitamin A and for the prevention of anaemia.

Education

60. Past cooperation in education has utilized innovative approaches to reach displaced families and the poorest sectors in urban and rural areas, such as literacy by radio and the "active schools" project, which incorporates flexible curricula, schedules and calendars to meet the needs of children, particularly in rural areas during harvest time. Access to pre-school,

primary school and adult literacy has been provided through these projects to over 500,000 beneficiaries.

61. Evaluation of these projects has shown their effectiveness in reaching neglected groups, and the methodologies developed are now receiving serious consideration for country-wide replication. Programmes in early childhood education and primary education are being developed for financial assistance from the World Bank, with which UNICEF is working in close partnership.

62. UNICEF cooperation will aim to expand current efforts, pending receipt of funds from the World Bank. In pre-school and primary education, UNICEF will thus continue support in the areas of training, the provision of materials and equipment, and the printing of textbooks. Upon receipt of funding from the World Bank, this cooperation will focus uniquely on training and technical assistance. Support to the "literacy by radio" programme will continue through the development and production of materials for adult education and the training of promoters and pastoral agents.

Planning and policy development

63. El Salvador has already ratified the Convention on the Rights of the Child. UNICEF will support national legislation and a strong social mobilization process with schools, NGOs, communities, political leaders and institutions to promote acknowledgement and demand for compliance with the Convention.

64. Technical assistance will be provided to support the ongoing reformulation of social policies within the framework of adjustment and budget reorientation of the Ministries of Health and Education. Technical support will also be provided to assist the Social Investment Fund in strengthening its work with municipalities and in supporting project identification and service delivery.

Water and sanitation

65. UNICEF has provided cooperation in the area of water and sanitation, focused on the development of appropriate technologies for increased access to potable water supply and excreta disposal services. In 1990 alone, over 20,000 people benefited from the construction of 4,000 family latrines and the installation of 25 gravity-fed water systems, while over 1,500 polyvinyl chloride hand-pumps for shallow wells were supplied.

66. To continue this programme pending receipt of supplementary funding for the subregional water and sanitation programme (E/ICEF/1991/P/L.25), continued assistance will be provided for the construction of gravity systems, greater emphasis on health education and sanitary practices and the assessment and implementation of cost-recovery and user fees.

Children in especially difficult circumstances

67. Activities have been planned to address the needs of street and working children within the subregional programme (E/ICEF/1990/P/L.30), but since funding has not yet been secured, certain activities will be initiated using general resources. These will include technical assistance to the National Family Secretariat to support planned activities for street children in San Salvador, the capital, and for children in institutions and child workers. Special emphasis will be given to the needs of adolescent mothers, to provide outpatient services for young mothers in San Salvador and in other cities, and for education, counselling and income-generating activities.

V. PAPUA NEW GUINEA

68. The current country programme of Papua New Guinea was approved by the Executive Board in 1988 for the period 1988-1992 with a total allocation of $1.2 million from general resources (E/ICEF/1988/P/L.22). The annual planning level for Papua New Guinea was increased from $240,000 to $500,000 beginning in 1989, and again to $750,000 from 1991 in order to accelerate activities within the framework of the country programme. An additional $1.34 million is required for the remaining two years of the programme.

69. The funds will be used for maternal health, EPI, CDD, community-based CSD programmes and basic education, coupled with social mobilization activities. Adjustments will be made to better address priority needs as identified in the mid-term review of the country programme, held jointly with the Government in late 1990. Training will be further strengthened in all programme components to help ease the human resources shortage, which has been strongly felt in the provinces, particularly since the Government has accelerated its decentralization process.

Health

70. The loss of revenue caused by the closure of the copper mine in Bougainville at the beginning of 1990 led to drastic cuts in government expenditure in health since the mine had been a main source of government income. EPI was seriously affected because of the virtual suspension of funds for all rural health services. Intensified work and funding from UNICEF managed to raise immunization levels from 53 per cent in 1989 to 60 per cent by the end of 1990. Continued efforts will be made to expand the programme to all provinces and attain as high coverage levels as possible. Social mobilization will be carried out, with an emphasis on increasing measles and tetanus toxoid vaccinations.

71. Diarrhoeal diseases are one of the leading causes of infant and child deaths. With increased funding, CDD will continue to be provided nation-wide. Emphasis will be on early recognition and treatment at home by promoting ORT and the correct use of ORS. Other main preventive interventions include sanitation and hygiene education linked closely with the CDD programme.

72. The country has an MMR of over 800 per 100,000 live births, one of the highest in the world. Efforts to address the problem will be further strengthened in the Southern Highlands and Milne Bay provinces by improving maternal care through the training of TBAs. As a result of advocacy for national replication of the programme, a policy has been announced to include TBA training in community development. Training will be extended to other provinces when preparatory work on curricula standardization and the development of training manuals for illiterate TBAs has been completed.

Community-based child survival and development

73. The project in the Southern Highlands Province will be continued. Greater understanding and acceptance by the various sectors of the need for integration was noted in the mid-term programme review. Improved planning and monitoring, the promotion of women's participation in all project components and specific projects for women's development will all be emphasized. Training will be provided to strengthen the capabilities of district-level officials and implementors to assume area-based CSD programming and implementation and to improve management and coordination once the programming responsibility has been assigned to the Provincial Planning Office.

74. Assistance will also be continued in the Kila-Kila urban settlement. The progress of the project has been slow, and more effective advocacy and social mobilization will be needed to increase community awareness for more active participation. The project includes such elements as family food production linked with nutrition education, and the promotion of pit latrines combined with hygiene education and training for leadership and community organization.

Education

75. The adult literacy rate for women in Papua New Guinea is 35 per cent, compared with 55 per cent for men. Although primary school enrolment for girls is improving, it is still low at 66 per cent and the retention rate is less than 38 per cent, with the highest drop-out rate before the end of the first year. The issue became a main concern during the mid-term review of the country programme, which recommended that basic education become a main component of the programme. The 1991 budget for education was increased, the National Literacy Awareness Secretariat was established, as was an International Literacy Year Committee for 1990-1991. UNICEF will assist education planning, materials preparation, training in curriculum development and teacher training. Experiments will be undertaken for approaches such as multi-grade and mobile classes. Similar activities will also be carried out in adult education.

Social mobilization

76. Social mobilization was introduced first for UCI as a framework for advocacy at macro-levels. Advocacy for political commitment to social development, focusing on children and women, received a major boost with the Prime Minister's participation in the World Summit for Children and his signing of both the Summit Declaration and the Convention on the Rights of the

Child. At the same time, a study on "adjustment with a human face" was completed, while an update on the situation of children and women is under way in preparation for the second country programme for 1993-1997.

77. More focused social mobilization will be undertaken as a strategy for achieving sectoral objectives. Facts for Life, already adapted to the Papua New Guinea context, will be incorporated in all relevant projects, including adult education. Experience with UCI mobilization has demonstrated the effectiveness of community theatres and puppetry as modes of communication that can be applied to other programmes.

Programme planning and preparation

78. Working towards the submission of the country programme for 1993-1997, the situation analysis will be finalized in 1991, as will the strategy paper and the country programme of cooperation. Workshops will be organized, and technical support for programming and documentation will be needed. Advocacy and social mobilization for the benefit of children and women in Papua New Guinea will be integrated into the entire country programming process.

Breakdown of annual funding requirements

(In thousands of United States dollars)

Region/country	Current programme cycle	Approved general resources funding a/	Additional funding proposed 1990	1991	Total
AFRICA					
Côte d'Ivoire	1990-1991	1 940	1 203	-	1 203
AMERICAS AND THE CARIBBEAN					
Colombia	1988-1992	4 662	68	1 100	1 168
Eastern Caribbean countries	1988-1992	1 638	289	900	1 189
El Salvador	1988-1992	-	501	750	1 251
ASIA					
Papua New Guinea	1988-1992	1 200	590	750	1 340
Total			2 651	3 500	6 151

a/ The amounts shown here include the actual balances carried over from the previous programme cycle.